

MONTANA STATE ELECTRICAL BOARD
301 S. Park
POB 200513
Helena MT 59620-0513
(406)841-2367 FAX (406)841-2309
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APPLICATION PROCEDURE FOR MONTANA ELECTRICAL LICENSE

In the State of Montana, a person may not engage in or work at the business, trade or calling of electrical contractor, residential electrician, journeyman electrician, or master electrician until that person has received from the Montana State Electrical Board, a license or a temporary work permit. All electricians must work under an electrical contractor license. To obtain information concerning the Electrical Contractor licenses please access the Electrical Contractor category on the Internet or contact the Board office.

- **CATAGORIES:** Residential electrician (limited to residential work only)
Journeyman Electrician
Master electrician
- **APPLICATION:** All applicants shall submit a State of Montana application. The applications shall be complete, have an original signature, and be notarized. The necessary verification and appropriate fees shall accompany the application.

FEES: All fees are made payable to: State of Montana Electrical Board.

Exam Application: \$120.00 (includes original license fee upon passing exam)

Reciprocity or Endorsement Application: \$125.00 (see instructions for endorsement)

Temporary Permit: \$ 20.00 (residential and journeyman only)

Note: An applicant for a master electrician license may be issued a temporary journeyman permit if the applicant has met the minimum requirements for a master's license. Individuals applying for a reciprocal license will typically receive a license within fourteen days and will not need a temporary permit unless they will be working in Montana prior to the reciprocal license being issued.

EXAMINATION: Applications must be approved by the Board or Board Representative to sit for the exam. Approved applicants will be sent a letter explaining the exam process.

- **PROCEDURES:**
 1. Submit a completed application.
 2. Submit the appropriate fees and the required verification with the application.
 3. Applicants may request their application be considered for a temporary work permit prior to a scheduled Board meeting. If pre-approved by a Board representative, the temporary work permit will be available by mail or in the Board office upon request and payment. The Board or Board representative must approve applications before a temporary work permit is issued. A temporary work permit will not be issued without an application and application fee.
 4. Applications requiring full Board approval will be reviewed at the next scheduled meeting. Meetings are held in January, April, July or October. Upon approval by the full Board, endorsement applicants will be issued a Montana electrical license and all examination applicants will be sent a letter of approval for the next scheduled exam.

5. Exams processes are currently being modified. A letter will be sent to all individuals eligible for an examination explaining what they will need to do next.
6. The Board office will notify the applicant of the examination results in writing. Examination results will not be given via a telephone call.

Instructions for Electrical License Application By EXAMINATION

The following applies to all applications for licensure by examination:

FEE: \$120.00 application fee
\$20.00 temporary work permit (optional for residential or journeyman)

THIRD PARTY VERIFICATION:

Experience vouchers are attached to the application (preferred method). Other acceptable forms of experience verification allowed are in the form of letters from past and/or current employers. Letters must be written on company letterhead, contain the date the letter was written, dates of employment, position held, and the specific number of hours worked in each area (i.e. commercial, residential, institutional or industrial).

EXEMPT WORK:

The Board will only accept electrical experience in the construction field. Maintenance work is exempt under Section 37-68-103, MCA, and is not accepted towards meeting any of the practical experience requirements. **Exception:** Applicants who have worked in the electrical field for 10 years and their employer provides a letter stating the employer feels the applicant is capable and qualified for the exam will be approved for examination (journeyman or residential) as provided under Section 37-68-314(3), MCA.

APPRENTICESHIP:

Applicants who include a completion certificate from the Montana Apprenticeship & Training Program will be approved for the next available exam.

UNION TRAVEL LETTER:

Travel letters must state that the applicant has completed a JATC apprenticeship. Section 37-68-314(1), MCA allows for approval of exam candidates who include this letter with their application.

CATAGORIES:

RESIDENTIAL ELECTRICIAN:

- Verification that the applicant served at least a two-year (4,000 hours) apprenticeship in the electrical trade. Verification of the apprenticeship must be in writing from the apprenticeship program.

OR

- Third party voucher(s) or verification(s) of at least two years (4,000 hours) practical experience in wiring for, installing and repairing of electrical apparatus and equipment for light, heat and power.

JOURNEYMAN ELECTRICIAN:

- Verification that the applicant completed a four-year (8,000 hours) electrical apprenticeship. Verification of the apprenticeship must be in writing from the apprenticeship program.

OR

- Voucher(s) or third party verification letters of at least four years (8,000 hours) of practical experience in wiring for, installing and repairing of electrical apparatus and equipment for light, heat and power. **NOTE:**

No more than 4,000 of the 8,000 hours can be residential construction in nature. The remaining 4,000 hours must be obtained in commercial, industrial and/or institutional electrical construction. Credit may be given for Board recognized electrical trade school hours.

MASTER ELECTRICIAN:

- Copy of the applicant's Electrical Engineering Degree (4 years) from an accredited college or university and a voucher or letters of verification from employers that the applicant has at least one-year practical electrical installation experience in the electrical field.
- OR**
- Copy of a certificate or diploma verifying that the applicant is a graduate of a post secondary electrical trade school recognized by the Board and voucher(s) or letters of verification from employers that the applicant has at least four years (8,000 hours) practical experience in the electrical field.
- OR**
- Voucher(s) or third party verification letters of at least five years (10,000 hours) of **journeyman level** experience in planning, laying out, and supervising the installation and repair of wiring apparatus for electrical light, heat and power. **The journeyman level experience must be obtained by a combination of residential, commercial and industrial work. No less than 20%, but no more than 50% of the required experience may be obtained by residential work.**

**Instructions for Electrical License Application By
RECIPROCITY**

All applicants for a Montana master electrician license are by exam only. Montana does “NOT” reciprocate a master electrician, administrator, or supervisor license from other states to master electrician license in Montana. Applicants who hold a master electrician license may reciprocate their license to a journeyman electrician if they meet the conditions listed below.

If applicant answers “yes” to ALL parts of question number ten (10) on the application, the applicant may be eligible for licensure by endorsement or reciprocity. If applicant answers “no” to ANY part of question number ten (10) on the application, the applicant is not eligible for licensure by endorsement or reciprocity and must follow the instructions and procedures for licensure by examination.

Montana is reciprocal with the following states: Alaska, Arkansas, Colorado, Idaho, Minnesota, Nebraska, North Dakota, South Dakota, Utah, Washington and Wyoming. **Board staff will verify your license status with these states.** You will not need to complete the Electrical Employment Record section of the application for reciprocal states. Applicants applying for reciprocity must have taken the exam in the state they are reciprocating from, scored 75% or better on the exam, held the license for at least one year, the license must be active and no complaints filed against the license. Please provide a photocopy of your current license with your application. The application fee is \$125.00 dollars. A temporary work permit is available for an additional \$20.00 dollars but may not be necessary unless the applicant needs to go to work immediately. A typical license verification will be accomplished within three to five business days and a regular license would be issued. Applicants who scored less than 75% or the reciprocal state does not have your exam score will be required to sit for the Montana exam and will need a temporary work permit to work in Montana. Applicants who do not sit for the exam will not qualify for another temporary work permit in Montana again.

Montana is reciprocal with Oregon. Oregon applicants for reciprocity will need to obtain a license verification from the State of Oregon and submit the verification with their application.

Instructions for Electrical License Application By ENDORSEMENT

All applicants for licensure by endorsement shall submit the following:

- A completed application and written verification from the state of licensure. Please see the list below for the necessary information required in the written verification. The Board will review the application and written verification to determine if endorsement will be allowed. A temporary permit will be available when a state meets or exceeds Montana's minimum qualifications. The application fee is \$125.00 dollars. A temporary work permit is available for an additional \$20.00 dollars if the minimum qualifications are met.
- **Written license verification from the state, which the applicant has held a current state license for at least one year.** The verification shall disclose the:
 - date that the license was originally issued;
 - date that the license expires;
 - whether the license is active and in good standing;
 - what qualifications were met by the applicant in order to sit their examination, including any blend of experience that was required; and
 - the applicant's examination score which must be 75% or higher.

Endorsement applications will be presented the Board for their approval. Upon Board approval of the application for licensure, a Montana license will be issued and mailed to the address listed on the application.

If the Board does not approve an applicant for licensure by endorsement or reciprocity, the Board will review the application for licensure by examination. If the Board approves the applicant for licensure by examination, the applicant will be sent a letter with details on how to register for an exam.

MONTANA STATE ELECTRICAL BOARD

301 S Park, P. O. Box 200513
Helena, Montana 59620-0513
(406) 841-2367 FAX (406) 841-2309
Email: dlibsdele@mt.gov
Website: <http://www.electrician.mt.gov>

Application for Licensure as: ☐ Master Electrician ☐ Journeyman Electrician ☐ Residential Electrician
This Application is Submitted for Licensure by: ☐ Examination ☐ Endorsement or reciprocity
Written notification will be sent within 14 working days of receipt of the application advising of the status of an application.

APPLICATION FEE \$120.00 by exam \$125 by endorsement Temporary permit fee \$20.00

1. FULL NAME _____
Last First Middle

2. OTHER NAMES KNOWN BY _____

3. HOME ADDRESS _____
Street or PO Box # City and State Zip Country

4. PRESENT EMPLOYER _____

5. EMPLOYER'S ADDRESS _____
Street or PO Box # City and State Zip Country

PREFERRED MAILING ADDRESS: ☐ Business ☐ Home E-MAIL ADDRESS _____

6. TELEPHONE (_____) (_____) (_____) _____
Business Home Fax

7. SOCIAL SECURITY NUMBER _____ FOREIGN ID NUMBER _____

8. DATE OF BIRTH _____ AGE _____ PLACE OF BIRTH _____
(Month, Day, Year) City/State ☐ MALE ☐ FEMALE

9. LICENSE NAME _____
(State your name as it should appear on the license if granted.)

10. **To be considered for licensure by endorsement or reciprocity, an applicant must answer yes to the next four questions and submit acceptable documentation.** If the applicant gives a no response, the applicant is NOT ELIGIBLE for licensure by endorsement or reciprocity and must follow the examination procedures.

a. Are you licensed in another STATE which requires at least four years experience or completion of a qualifying Apprenticeship program.

☐ Yes Name of State _____
☐ No (You are not eligible for endorsement licensure. You must follow the examination procedures.)

b. Did you pass the examination in that state with a score of 75% or better?

☐ Yes Test Score _____
☐ No (You are not eligible for endorsement licensure. You must follow the examination procedures.)

c. Have you held that license for over one year?

☐ Yes Date License Issued _____
☐ No (You are not eligible for endorsement licensure. You must follow the examination procedures.)

d. Is your license still active and in good standing?

☐ Yes Expiration Date _____
☐ No (You are not eligible for endorsement licensure. You must follow the examination procedures.)

ALL APPLICANTS MUST COMPLETE THIS APPLICATION IN ITS ENTIRETY.

11. LICENSURE INFORMATION: All applicants must answer the following questions. If you answer yes, give specific details (names of organizations, dates, reasons, and outcome) on a Supplement Sheet.

- a. Have you ever applied for or taken a Montana electrical licensure examination? If yes, ☐ Yes ☐ No
 Type of Exam: _____
 Date Taken: _____
 Exam Score: _____
- b. Have you ever applied for or taken an electrical licensure examination in any other state? If yes, attach a detailed explanation giving name of state, type of exam taken, date applied for or taken and results. ☐ Yes ☐ No
- c. Have you ever been denied the right to take this profession's licensing examination in any state? If yes, attach a detailed explanation. ☐ Yes ☐ No
- d. If taking an examination, do you have any physical or mental impairment(s) requiring special accommodation(s)? If yes, attach a detailed explanation. ☐ Yes ☐ No
- e. List all professional/occupational licenses, registrations, or certificates granted to you. If necessary, attach a supplement sheet. Attach a copy of the licenses

State/Province/Territory	Type of License	License Number	Date Issued	How Obtained	Is It Current

- f. Has a licensing agency ever taken adverse or disciplinary action against your license (certificate)? If yes, attach a detailed explanation. ☐ Yes ☐ No
- g. Has your license (certificate) ever been forfeited or surrendered? If yes, attach a detailed explanation. ☐ Yes ☐ No

12. APPRENTICESHIP/EDUCATION INFORMATION:

- a. Are you currently in an apprenticeship program? ☐ Yes ☐ No
 If yes, name of sponsor: _____
- b. Did you complete a state-sponsored apprenticeship program? ☐ Yes ☐ No
 If yes, name of state _____
 Employer name _____
- c. Did you complete a union sponsored apprenticeship program? ☐ Yes ☐ No
 If yes, Union Local No. _____ City/State _____
- d. Did you complete an independent apprenticeship program? ☐ Yes ☐ No
 If yes, Employer Name: _____
 Address: _____
- e. Are you a graduate of an Electrical Construction Trade School? ☐ Yes ☐ No
 If yes, you must attach a copy of your transcript.
- f. Do you have a Bachelor Degree in Electrical Engineering? ☐ Yes ☐ No
 If yes, you must attach a copy of your transcript.

13. ELECTRICAL EMPLOYMENT RECORD: (List all places of employment and dates of employment. It is very important that you supply correct addresses and telephone numbers.) If necessary, attach Supplement Sheet.

Date:	From	To
Name:		
Address:		
Telephone Number:		
Please indicate type of electrical work performed: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Maintenance		

Date:	From	To
Name:		
Address:		
Telephone Number:		
Please indicate type of electrical work performed: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Maintenance		

Date:	From	To
Name:		
Address:		
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Please indicate type of electrical work performed: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Maintenance		

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Name:		
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Please indicate type of electrical work performed: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Maintenance		

Date:	From	To
Name:		
Address:		
Telephone Number:		
Please indicate type of electrical work performed: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Maintenance		

ALL QUESTIONS MUST BE ANSWERED:

14. Has a complaint ever been made against you alleging unethical behavior or unprofessional conduct? ☐ Yes ☐ No
If yes, attach a detailed explanation.
15. Has any legal or disciplinary action been filed against you which relates to the propriety or your fitness to practice this profession? ☐ Yes ☐ No
If yes, attach a detailed explanation.
16. Have you ever been expelled from or asked to resign from any professional organization or been censured by a professional organization of which you were a member? ☐ Yes ☐ No
If yes, attach a detailed explanation.
17. Have you ever been charged with or convicted of a crime (including a plea of no contest or deferred prosecution) relating to, or committed during the course of your professional practice, involving violence, use or sale of drugs, fraud, deceit, or theft, whether or not an appeal is pending? You may omit:
(1) traffic violations for which you paid a fine of \$100.00 or less and (2) charges or convictions prior to your 16th birthday. If yes, attach a detailed explanation. ☐ Yes ☐ No
18. Have you ever been charged with fraud, formally or informally, in any civil proceeding? ☐ Yes ☐ No
If yes, attach a detailed explanation.
19. Have you any physical or mental condition which has in the past three years adversely affected your ability to practice this profession, including but not limited to, a contagious or infectious disease involving serious risk to the public? ☐ Yes ☐ No
If yes, attach a detailed explanation.
20. Have you, within the last three years, used alcohol or any other mood-altering substance in a manner which adversely affected your ability to practice this profession? ☐ Yes ☐ No
If yes, attach a detailed explanation.

AFFIDAVIT

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana State Electrical Board.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of licensure on ethical grounds. I have read and am familiar with the applicable licensure laws of the State of Montana and instructions to applicants for licensing. I accept the rules and procedures outlined in these documents as the basis for my application.

Legal Signature of Applicant

Dated

Subscribed and sworn to by me this _____ day of _____, _____ at

City/State

Notary Public

SEAL

For the State of

My commission expires _____, _____.

MONTANA STATE ELECTRICAL BOARD
POB 200513
HELENA MT 59620-0513

JOURNEYMAN / RESIDENTIAL EXPERIENCE VERIFICATION AFFIDAVIT

Make a copy of this form for each employer you want to be considered for verification. This form must be returned to the above address before application will be considered. All fields must be completed.

1. Name of applicant: _____
Last First Mi

Applicant address: _____
City State Zip

2. Name of Electrical Contracting Business who employed the above applicant:

Please print name of firm, partnership or corporation
Address of employer: _____
City State Zip
Phone # of Contractor: _____

3. Position held by the above applicant: _____

4. Dates of employment: from _____ to _____

5. Breakdown of hours: (MUST BE COMPLETED)

Hours must be in the construction field (maintenance work is not accepted) ARM 24.141.501
Residential _____, Commercial/Industrial/Institutional _____

6. Did this person complete a registered apprenticeship program while in your employ?
_____ Yes _____ No

I HEREBY CERTIFY THE ABOVE TIMES AND DATES OF EMPLOYMENT, THE TYPE OF ELECTRICAL WORK PERFORMED DURING THE APPLICANT'S EMPLOYMENT AND THE INFORMATION IS TRUE AND CORRECT.

Signature of Employer before Notary Date: _____

The above, first being duly sworn, deposes and says he/she is the person making the forgoing statement.

Subscribed and sworn to me this _____ day of _____, 20____, at

City/State

SEAL

NOTARY PUBLIC _____
My commission expires _____

MONTANA STATE ELECTRICAL BOARD
POB 200513
HELENA MT 59620-0513

MASTER EXPERIENCE VERIFICATION AFFIDAVIT

Make a copy of this form for each employer you want to be considered for verification. This must be returned to the above address before application can be considered. All fields must be completed.

1. Name of applicant: _____
Last First Mi
 Applicant address: _____
City State Zip

2. Name of Electrical Contracting Business who employed the above applicant:

 Please print name of firm, partnership or corporation
 Address of employer: _____
City State Zip
 Phone # of Contractor: _____

3. Position held by the above applicant: _____

4. Dates of employment: from _____ to _____

5. Breakdown of hours: (MINIMUM OF ONE SECTION MUST BE COMPLETED)

a. Journeyman level experience in planning, layout or supervision for the installation and repair of light heat and power. **Do not include hours worked while in an apprenticeship program.**

_____ Residential Hours

_____ Commercial/Industrial/Institutional Hours

b. Graduate electrical engineer of an accredited college or university and one year practical installation experience. _____ Hours (attach transcripts to form)

c. Graduate of electrical trade school and four years practical installation experience.
 _____ Hours (attach transcripts to form)

I HEREBY CERTIFY THE ABOVE TIMES AND DATES OF EMPLOYMENT, THE TYPE OF ELECTRICAL WORK PERFORMED DURING THE APPLICANT'S EMPLOYMENT AND THE INFORMATION IS TRUE AND CORRECT.

 Signature of Employer before Notary Date: _____

The above, first being duly sworn, deposes and says he/she is the person making the forgoing statement.

Subscribed and sworn to me this _____ day of _____, 20____, at

 City/State

SEAL

NOTARY PUBLIC _____

My commission expires _____